



noble street festival

July 3, 2021, 11AM - 7PM

Separate this section and retain for your records

Mad Dash

A foot race to the finish! Ages 12 and younger, \$6/child. Be at the start line at 4:35 pm SHARP! Dash starts at 4:45pm. Participants will receive a t-shirt.

YMCA Bike Race

Get your bicycle on the mark and race to the finish line! Grade 6 or below, \$6. Line up is at 5:25 pm SHARP! Race starts at 5:35 pm. 5th and 6th graders will ride the 0.7mi race course. Participants will receive a t-shirt. Bring your own bicycle and helmet (required).

Packet pick-up is from 11-4 at Classic on Nobles (1024 Noble St.) All participants must check in to receive a t-shirt and race number.

Festival Coordinator: Jackson Hodges, jhodges@anniston.gov

Registration Form

Use separate form for each child

Child's Name _____ Age _____

School _____ Grade _____

Parent/Guardian Name _____

Address _____ State _____ Zip _____

Phone _____ Email _____

Special considerations _____

Deadline for pre-registration, complete with payment, is **June 25, 2021**

Send completed form and payment to YMCA, Attn: Maggie Burn

Owens, P.O. Box 1649, Anniston, AL 36202. Day of registrations will be

\$10/event. Registrations also accepted day of event before 3 PM at

Classic on Noble, 1024 Noble St.

T-SHIRT	XS	S	M	L	XL
Child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	n/a
Adult	n/a	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PAYMENT

Please use separate form for each child

☐ Mad Dash \$6

☐ YMCA Bicycle Race \$6

☐ Combo - both events \$10

Total Enclosed \$_____

Make checks payable to City of Anniston

AUTHORIZATION FOR MEDICAL TREATMENT: I do hereby voluntarily consent to and authorize the emergency medical treatment and care of _____, Physician as may be deemed necessary and advisable.

Witness _____, Parent/Guardian Signature _____ Date ____/____/____

PLEASE READ CAREFULLY: I/We, the parents of the above named candidate, hereby give my/our approval to his/her participation in this athletic activity. I/We assume all risks and hazards, incidental to such participation including transportation to and from activities; and I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the City of Anniston and its agents from activities for claims arising out of any injury to my child.

Parent/Guardian Signature _____ Date _____



Office use only: PAID _____ REGISTERED _____ CONFIRMED _____

REFERENCE MAP

